Obtain a Partnership Agent ID Card and/or Join the Mailing List

The **Agent ID Card** shows prospective clients that you are a "certified Indiana Partnership" agent. It confirms you have taken the necessary training required to sell Indiana Partnership policies.

The Agent ID Card signed by the Partnership Office will display your name, the issue date (date of completion of your 7-hour Partnership course), the Partnership logo.

The initial card is available <u>free of charge</u>. Replacement cards will cost \$5.00 each. Check should be made payable to "Indiana Department of Insurance."

Professionals on the **mailing list** receive various Partnership mailings, including the quarterly newsletter. This is an ideal method to stay current on the Indiana Partnership Program and long term care issues.

Instructions: Complete the form below. Then fax, mail or e-mail the completed form, <u>along</u> <u>with a copy of your certificate of completion for the 7-hour Partnership course</u> if requesting an Agent ID card to:

Danielle Fuller
Indiana Department of Insurance
311 W. Washington St., Suite 300
Indianapolis, IN 46204-2787
(317) 232-4391 Telephone
(317) 232-5251 Fax
dfuller@idoi.in.gov

| Please send me an Indiana Partnership Ag | ent ID Card | | |
|---|-------------|-------|--------|
| Initial Card or Replacement Card | | | |
| Please add me to the Partnership Mailing | List | | |
| Please print clearly or type. | | Date: | |
| Name: | | | |
| Agency Name: | | | |
| Address: | | | |
| City, State, Zip Code: | | | |
| Phone: | E-mail: | | |
| Please allow 30 working days for delivery of ID Card. | | | (3/09) |